COLORADO WIC PROGRAM APPROVED FORMULAS

Standard Contract Infant Formulas

These formulas will be given unless a physician diagnoses a medical condition that warrants a specialty formula.

- No prescription is needed for infants.
- A prescription is needed for adults and children over one-year of age and is valid for up to six (6) months.

Enfamil Premium Infant Enfamil ProSobee Enfamil Gentlease

Enfamil AR

Specialty Formulas

Medical documentation is required for issuance of these formulas. Reasons such as "colic," "spitting up," or "constipation" will NOT be accepted as a substitute for a medical diagnosis.

Boost High Protein Nutren 1.0

Boost Kid Essentials 1.5 cal Nutren 1.0 with Fiber

Boost Kid Essentials 1.5 cal with fiber

Bright Beginnings Soy Pediatric Drink

Compleat Pediatric

E028 Splash

Nutren 1.5

Nutren 2.0

Osmolite 1 Cal

PediaSure (any flavor)

EleCare Infant PediaSure (any flavor)

FleCare Infant PediaSure with Fiber (any flavor)

EleCare Junior PediaSure Enteral

(only for children over 1 year) PediaSure Enteral with Fiber and scFOS

Enfagrow Soy Toddler PediaSure 1.5 cal

(only for children over 1 year) PediaSure 1.5 cal with Fiber

Enfamil EnfaCare Peptamen Enfaport Peptamen Junior

Ensure Peptamen Junior with Fiber

Ensure Plus Portagen
Gerber Good Start Nourish Pregestimil
Neocate Infant with DHA & ARA PurAmino

Neocate Junior Similac Expert Care Alimentum
Neocate Junior with Prebiotics Similac Expert Care NeoSure

Nutramigen Similac PM 60/40

Nutramigen with Enflora LGG Tolerex

Nutren Junior Vivonex Pediatric Nutren Junior with Prebio Fiber Vivonex T.E.N.

Formulas for Inherited Metabolic Diseases

Calcilo-XD Pro-Phree
Cyclinex-1 & 2 ProViMin
Glutarex-1 & 2 Propimex-1 & 2

Hominex-1 & 2 RCF
I Valex-1 & 2 Tyrex-1 & 2
Ketonex-1 & 2 TYROS-1 & 2

MSUD Analog, Maximaid & Maximum

Periflex Infant

Periflex Junior

Phenex-1 & 2

XLeu Analog, Maxamaid & Maxamum

XLys, XTrp Analog, Maxamaid & Maxamum

XMet Analog, Maxamaid & Maxamum

XMTVI Analog, Maxamaid & Maxamum

PhenylAde Essential Drink Mix XPhe Maxamaid & Maximum Phenyl-Free 1 & 2 XPhe, XTyr Analog & Maxamaid

Phenyl-Free HP XPTM Analog

For questions about Colorado WIC approved formulas contact the State WIC Office at (303) 692-2400. Electronic copy of this form available at: http://www.coloradowic.com